RESEARCH HIGHLIGHT

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Building Community: The Story of Supportive Housing for Young Mothers (SHYM)

INTRODUCTION

At a time in their lives when they need a strong support system to develop a stable identity and to become productive and autonomous adults, an increasing number of adolescents face an extremely challenging test of independence—that of homelessness.

Young lone mothers are a group that often faces housing and support challenges. Teen mothers have a distinct set of developmental needs and, in many cases, significant mental health problems. While little is known about this population, existing data suggest that teen mothers are often marginalized by society and are not well supported by the social service sector.

Supportive Housing for Young Mothers (SHYM), in Halifax, Nova Scotia, is a non-profit, community-based supportive housing complex for young mothers who are homeless or at risk of becoming homeless. Founded in 2001 by a group of concerned community members, academics and service providers, SHYM opened its doors to young mothers and their children in late fall 2007. Programs such as that provided by Supportive Housing for Young Mothers aim to do more than just provide a safe and affordable place to live *for the present*. They also strive to develop skills, education, awareness, confidence, resources and social support networks —in the belief that these attributes (sometimes referred to as human and social capital assets) will prevent or buffer homelessness in the future and promote overall health, safety and stability for each young family. The primary mission of this housing structure is therefore to provide a supportive and caring environment to young mothers in order for them to build/rebuild their sense of self, develop/redevelop social and human capital for their futures and acquire life management and parenting skills.

Using Supportive Housing for Young Mothers (SHYM) as a case-study, this research examined the supportive housing model that underlies such programs and the experience of young mothers served by the program to determine if supportive housing can be effective in achieving these goals.

RESEARCH OBJECTIVES AND METHODOLOGY

The objectives on which the research focused were to:

- explore the experiences of SHYM tenants with regard to homelessness, the trajectory to being homeless and the transition to SHYM;
- study the experience of living at SHYM and how it affects sense of self, health and social needs;
- inform other non-profit organizations of the strengths and limitations in developing supportive models for young mothers;
- inform government and community stakeholders regarding the sustainability and effectiveness of various models; and
- advance the knowledge of community development practice.

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The research employed a case-study approach to develop a rich contextual understanding of the experience of young mothers living at SHYM. Two sets of semi-structured, one-on-one interviews were conducted with tenants at a six-month interval. All interviews took place at SHYM, either in the interviewee's apartment or elsewhere on the premises. Ten tenants participated in the first round of interviews in the fall of 2008, representing 100 per cent of the tenants who resided at SHYM at the time of these interviews. Seven of the original ten tenants participated in the second round of interviews six months later. The remaining three tenants had left SHYM by the time of the second round of interviews and did not provide information that could be used to contact them. By interviewing tenants a second time six months after the first set of interviews, the researchers sought to understand how the tenants' experience at SHYM and their perceptions of SHYM changed within this time period, and how SHYM impacted their lives over time. To complement this qualitative inquiry, the study also included a quantitative assessment of the young mothers' quality of life using the World Health Organization Quality of Life (WHOQOL-BREF) tool—a 26-item survey that provides a quality of life profile.

Further, four SHYM staff members were interviewed in the first round of interviews. Two of these four staff members—those most central to SHYM's operations—were interviewed again in the second round of interviews. By conducting second interviews with two key staff members six months after the first interviews, the research team was able to examine operational changes that had occurred at SHYM in the intervening months, and why and how these changes had occurred.

Finally, and within the broader context of case-study methodology, a local history of SHYM was developed using relevant documents (Executive Director reports, financial statements and other official SHYM documents) and discussions with staff and Board members.

The research tools were designed to address a number of different research questions underlying the research objectives: What are the pathways through which young mothers become homeless and housed? How do young mothers experience SHYM? What are the strengths and limitations of this housing structure as a home and support system for young mothers? How do these young mothers view their sense of self, health and social needs in relation to supportive housing? How did SHYM evolve into its current housing form? What supports are needed to ensure that SHYM is sustainable and effective in the long term?

Data collection and analysis were conducted over a nine-month period from August 2008 until April 2009 in an iterative manner congruent with grounded theory processes. Data from the short quality of life survey were analyzed as outlined in the WHOQOL-BREF manual. Compilation of analysis and writing took place from April to June 2009.

FINDINGS

SHYM served as a short-term reprieve for young mothers who found themselves homeless in response to family trauma (for example, family violence or relational conflicts with parents) and poverty. Pregnancy was the trigger point to homelessness for some mothers; for others, it was merely an added stressor. Most of the tenants at SHYM were under the age of 19 and had to live in supervised accommodation, and they preferred SHYM as an alternative to group homes.

The findings of this study suggest that building a supportive housing structure is a complex process that involves many compromises and negotiations but that is ultimately rewarding and successful. Mothers and staff agreed that SHYM is making progress in its ability to help tenants develop skills, education, awareness, confidence, resources and social support networks, and that it is succeeding in promoting overall health, safety and stability for each young family.

Yet staff and tenant interviews contained diverse opinions about the best ways to support adolescent development—fostering healthy independence, responsible behaviour and social inclusion. The research indicates that during a life

stage that is tumultuous and difficult for young people, the tenants experienced a mixture of positive and negative tensions at SHYM. On the one hand, mothers resented the house rules and disliked features of the programming structure—its obligatory nature, obscure relevance and poor scheduling. Mothers felt their independence constrained and wanted behavioural expectations that invited them to voice their opinions and to make choices. They also struggled in their interpersonal relationships with other tenants at SHYM and felt a need to remain connected to their support networks of family and friends, even if the relationships involved were conflicted.

On the other hand, mothers were very appreciative when staff used one-on-one coaching, as opposed to regimented behaviour modification approaches, to assist with critical problem solving and decision making. Over time, they also agreed that some programs really did have relevance and, along with staff, even called for particular types of on-site schooling (such as high school upgrading) and a range of relevant life-skills programs (for example, budgeting, health, parenting, resumé writing) as critical next-step priorities for SHYM.

In the end, regardless of their own experiences, most tenants found SHYM to be a necessary and useful housing resource for young mothers. In addition, most reported a fairly high overall quality of life at both points in time and increasingly positive levels of overall health. Yet at the same time, mothers reported only average physical health scores and their social well-being (personal relationships, social support, and so on) diminished over the course of the study.

Interviews with the staff revealed a deep frustration with the level of funding and support that SHYM is able to obtain. A lack of funding has resulted in a small staff team that is insufficient to support the needs of the tenants, to develop the desired programming and to build additional resources for the project. In the short time that SHYM has been open, the staff team has been restructured to better meet the tenants' needs with limited resources, and the number of families staying at SHYM has been decreased.

CONCLUSIONS

The evolution of SHYM is an example of how organizations shift and change their operations in order to adapt to the external institutional and funding environment. SHYM has successfully navigated funding and regulatory challenges as a result of strategic management that involved flexibility, adaptability and innovativeness. Strategic management has also enabled SHYM to survive a number of significant internal challenges among mothers, staff and Board as they have gradually determined what approaches work best, whom SHYM can help and under what conditions SHYM can achieve its goals. By acknowledging important evolutionary trends in the life of SHYM, this study highlights the need for supportive housing structures to be organic and flexible—transforming the way in which they operate and serve their clients in order to adapt to external constraints and funding requirements.

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